FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

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OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response.....16.00

SEC U	SE ONLY
Prefix	Serial
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UNIFORM LIMITED OFFERING EXEMITION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Class B Membership Interest in the Franklin School Condominium, LLC, a limited liability company organized under Mass, law
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer OCT 2.5. 2004 OCT 3.5. 2004
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Franklin School Condominium, LLC, a Massachusetts limited liability company THOMSON
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
c/o The Equity Company, Inc. 1011 Fellsway, Medford, MA 02155 781-396-9700
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Gif different from Executive Offices) Same a a grave Brief Description of Business
Acquire and rehabilitate the Franklin School from the City of Medford, MA and convert the building to condominiums and then sell the condominiums to third party purchasers
Type of Business Organization
□ corporation □ limited partnership, already formed □ other (please specify): □ business trust □ limited partnership, to be formed □ limited liability Company (Wassachuset
Month Year
Actual or Estimated Date of Incorporation or Organization: 0 6 0 4 Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION —
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and a	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Williams, Richard					
Business or Residence Addre 32 Concord Street, Mald	•	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)	 			
Williams, Katherine					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
32 Concord Street, Malde	en, MA 02148				
Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, The Equity Company, In	•	.)	······································	, <u>.</u> , ,,,,	
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		·····
1011 Fellsway, Medford,	MA 02155				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	, v 4-1, .,	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	**************************************	······		
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)	 	
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					B. 11	NFORMATI	ON ABOU	r offere	NG				
1. Ha	s the	issuer enld	or does th	e icener ir	itend to se	il, to non-ac	credited i	nvestors in	this offeri	no?		Yes	No
1. 110	is inc	155401 5014	, or does in									<u> </u>	lead
2. W	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?								\$ 50,	00.00			
					• • • • • •	,,,,	,					Yes	No
3. Do	es the	e offering p	ermit joint	ownershi	p of a sing	le unit?							
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Na N/A	ime (I	Last name i	first, if indi	vidual)									
Busine	ss or l	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
				·····					······································				
Name o	of Ass	ociated Br	oker or De	aler .									
States i	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers		· · · · · · · · · · · · · · · · · · ·		···		
(C	heck '	"All States	" or check	individual	States)				,,,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐ Al	States
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N/A			first, if indi		154	Chan Chan	7:- C-10						
Busine	ss or	Residence	Address (I	number an	a Street, C	ity, State, 2	Lip Code)						
Name (of Ass	ociated Br	oker or De	aler								-	
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
(C	heck	"All States	or check	individual	States)			*************	·····	•••••	******************	☐ Al	l States
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Name (of Ass	sociated Br	oker or De	aler									
						to Solicit			***************************************				
(C	Check	"All States	or check	individua	States)	•••••	•••••••••••••••••••••••••••••••••••••••	•••••••••••••			**************	☐ Al	1 States
N N		AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 1,500,000.00	\$ 0.00
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	
	Other (Specify)	\$	\$
	Total	\$ 1,500,000.00	\$_0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, ind the number of persons who have purchased securities and the aggregate dollar amount of purchases on the total lines. Enter "0" if answer is "none" or "zero."	icate	Aggregate Dollar Amount of Purchases
	Accredited Investors		e or i memases
	Non-accredited Investors		\$ 1,500,000.00
	Total (for filings under Rule 504 only)		\$ 1,500,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to first sale of securities in this offering. Classify securities by type listed in Part C — Question	o the n 1.	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$ 0.00
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution o securities in this offering. Exclude amounts relating solely to organization expenses of the ins The information may be given as subject to future contingencies. If the amount of an expenditude	turer.	
	not known, furnish an estimate and check the box to the left of the estimate.		
	not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		\$
			\$ \$
	Transfer Agent's Fees		
	Transfer Agent's Fees Printing and Engraving Costs		\$
	Transfer Agent's Fees		\$ \$
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees		\$ \$
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees		\$\$ \$\$ \$

		E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?	sently subject to any of the disqualification	Yes	No K
	See A	Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required	ernish to any state administrator of any state in which this notice is fill by state law.	led a no	tice on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state administrators, upon written request, informat	ion furn	ished by the
4.	•	uer is familiar with the conditions that must be satisfied to be ent ate in which this notice is filed and understands that the issuer claim ing that these conditions have been satisfied.		
	er has read this notification and knows the content thorized person.	nts to be true and has duly caused this notice to be signed on its behal	f by the	undersigned
Issuer (Print or Type)	Signature Date /		
Franklin	School Condominium, LLC, a Massachusetts	1 / Repart Willedown 10/4/0	4	
Name (I	Print or Type)	Title (Print or Type)		

President, Equity Co., Inc. the managing member of the Franklin School Cond. LLC

Instruction:

Richard Williams

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1		2	3		•	4		5 Disquali	fication
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under Sta (if yes, explana waiver (Part E-	attach tion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
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DE									A re-
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State Yes No MO		Type of investor and amount purchased in State (Part C-Item 2)			(Part E-	granted) Item 1)	
MT NE	Yes	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NE							
NV							
The second secon							
NH 🗶	 ×				\$50,000.00		×

State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT			· · · · · · · · · · · · · · · · · · ·						
NE									
NV									
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			Type of security					Disqualification under State ULOE	
	Intend to sell		and aggregate					(if yes, attach	
	to non-accredited investors in State		offering price offered in state	Type of investor and amount purchased in State			explanation of waiver granted)		
	(Part B-Item 1)		(Part C-Item 1)	(Part C-Item 2)				(Part E-Item 1)	
				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
WY		G A C A							
PR									